PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER	37 CFR 1.136(a)	Docket Number (Option	Docket Number (Optional) P17742	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act,	2005 (M D 4840) \	P17742		
Application Number 10/656,077	2003 (FER. 4010).)	Filed 09/04/2003		
FOr A System and Associated Methods to Determine Author	ntication Priority Between		· · · · · · · · · · · · · · · · · · ·	
Art Unit 2687	•	Examiner Vu, Thai		
This is a request under the provisions of 37 CFR 1.13 application.				
The requested extension and fee are as follows (chec	k time period desired	and enter the appropriat	e fee below):	
<u></u>	<u>Fee</u>	Small Entity Fee		
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$_450.00	
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s	
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	3	
Applicant claims small entity status. See 37 CFR	1.27.			
— A shock in the execut of the fee is england	1			
A check in the amount of the fee is enclosed	•			
Payment by credit card. Form PTO-2038 is a	attached.			
The Director has already been authorized to	charge fees in this	application to a Depos	sit Account.	
The Director is hereby authorized to charge a	any fees which may	be required, or credit	any overpayment, for	
Deposit Account Number 50-0221	I hav	e enclosed a duplicate	copy of this sheet.	
WARNING: Information on this form may become pu Provide credit card information and authorization or	ubl ic. Credit card inform n PTO-2038.	nation should not be incl	ded on this form.	
am the applicant/inventor.				
assignee of record of the entire Statement under 37 CFR 3	e interest. See 37 C .73(b) is enclosed (FR 3.71. Form PTO/SB/96).		
attorney or agent of record. Re	egistration Number	43,021		
attorney or agent under 37 CF Registration number if acting under				
/s/Michael A. Proksch/Reg. No. 43,021/		November 29	, 2005	
Signature			Date	
Michael A. Proksch		503-264-3059		
Typed or printed name		Telepho	ne Number	
OTE: Signatures of all the inventors or assignees of record of the en gnature is required, see below.	tire interest or their represe	ntative(s) are required. Submit r	nultiple forms if more than or	
gradic is required, see perow.				
	e submitted.			

comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.

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